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COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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**\*BIBDATASHEET\***

Bib Data Sheet

**CONFIRMATION NO. 8739**

SERIAL NUMBER 09/680,064	FILING DATE 10/04/2000 RULE	CLASS 717	GROUP ART UNIT 2124	ATTORNEY DOCKET NO. 30013630-0005
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**APPLICANTS**

Peter Coad, Raleigh, NC;

Dietrich Charisius, Stuttgart, GERMANY;  
Alexander Aptus, Esslingen, GERMANY;

*TF*

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/157,826 10/05/1999  
and claims benefit of 60/199,046 04/21/2000

*TK*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***

**\*\* 12/19/2000**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> no <i>Examiner's Signature</i>	STATE OR COUNTRY NC	SHEETS DRAWING 8	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 8
Verified and Acknowledged	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> no <i>Initials</i>				

**ADDRESS**

23485  
JINAN GLASGOW  
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**TITLE**

Method and system for collapsing a graphical representation of related elements

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
RECEIVED 827		



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Bib Data Sheet

CONFIRMATION NO. 8739

SERIAL NUMBER 09/680,064	FILING DATE 10/04/2000 RULE	CLASS 345	GROUP ART UNIT 2673	ATTORNEY DOCKET NO. 30013630-0005
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## APPLICANTS

Peter Coad, Raleigh, NC;  
 Dietrich Charisius, Stuttgart, GERMANY;  
 Alexander Aptus, Esslingen, GERMANY;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLN CLAIMS BENEFIT OF 60/157,826 10/05/1999  
 AND CLAIMS BENEFIT OF 60/199,046 04/21/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE  
 GRANTED \*\* 12/19/2000

\*\* SMALL ENTITY \*\*

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 8	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

## ADDRESS

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 Chicago ,IL 60606-1080

## TITLE

Method and system for collapsing a graphical representation of related elements

FILING FEE RECEIVED 827	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit